

Monroe County School District Parent Study

- 1. Please indicate which of the schools listed below your child(ren) currently attend in the Monroe County School District. (Check all that apply.)**

Elementary Schools

- ☐ Gamaliel
- ☐ Joe Harrison Carter
- ☐ Tompkinsville

Middle School

- 1

High School

- 5

- 2. Please indicate the ages and genders of each child UNDER 18 living in your home.**

	Age	Boy	Girl
First Child	_____	<input type="checkbox"/>	<input type="checkbox"/>
Second Child	_____	<input type="checkbox"/>	<input type="checkbox"/>
Third Child	_____	<input type="checkbox"/>	<input type="checkbox"/>
Fourth Child	_____	<input type="checkbox"/>	<input type="checkbox"/>
Fifth Child	_____	<input type="checkbox"/>	<input type="checkbox"/>
Sixth Child	_____	<input type="checkbox"/>	<input type="checkbox"/>

3. Which of the following is the most important concern you have for your school aged child/children? (Please select just one.)

Choking Games	<input type="checkbox"/>
Cutting Self	<input type="checkbox"/>
Drinking Alcohol/Beer	<input type="checkbox"/>
Eating Disorders (Anorexia/Bulimia)	<input type="checkbox"/>
Peer Pressure/Bullying	<input type="checkbox"/>
Problems with Self Esteem	<input type="checkbox"/>
Smoking Cigarettes	<input type="checkbox"/>
Sniffing Household Products (Inhalants) to Get High	<input type="checkbox"/>
Using Illegal Drugs or Abusing Prescription Drugs	<input type="checkbox"/>
No Concern	<input type="checkbox"/>

- 4. Thinking now just about sniffing household products to get high (also known as ‘huffing’), please indicate how much, if at all, you’ve talked to your child about the risks associated with huffing.**

☐ Regularly ☐ Once or Twice ☐ Never

- 5. How would you rate your level of KNOWLEDGE about sniffing household products to get high?**
(Please use a scale of one to seven with 7 being very knowledgeable and 1 meaning not having any knowledge.)



PLEASE TURN THIS OVER AND ANSWER QUESTIONS ON OTHER SIDE.

6. How would you rate your level of COMFORT on discussing with your child the subject of sniffing household products to get high? (Again, use a scale of one to seven with 7 being very comfortable and 1 meaning not comfortable at all.)

Very <u>Comfortable</u>		←————→		————→		Not At All <u>Comfortable</u>
7	6	5	4	3	2	1
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. What do you believe are the **biggest** risks associated with sniffing household products?

8. What do you think is the youngest age that children begin to sniff household products to get high?

Enter age: _____

9. How many household products do you think are on the market that can be sniffed to get high?
(Please take your best guess and write it on the line below.)

Enter number: _____

10. What do you think is the most common household product used to sniff in order to get high?
(Please select just one.)

Aerosol products	<input type="checkbox"/>
Air Fresheners	<input type="checkbox"/>
Butane/Propane	<input type="checkbox"/>
Computer Cleaning Products	<input type="checkbox"/>
Gasoline	<input type="checkbox"/>
Glue	<input type="checkbox"/>
Spray Paint	<input type="checkbox"/>
Markers	<input type="checkbox"/>

11. For each of the following statements, please indicate if you think it is True, False or if you are Not Sure.

	<u>True</u>	<u>False</u>	<u>Not Sure</u>
Girls are more likely to experiment with inhalants than boys.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Headaches and loss of appetite are symptoms of inhalant abuse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalant abuse doesn't have serious long-term health consequences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most children who are abusing inhalants exhibit lots of symptoms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalant abuse is not addictive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than 15% of 10 th graders report having abused inhalants.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A child can die the first time he or she abuses an inhalant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalant abuse is easily treatable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Thinking about where you would go to learn more about issues like inhalant abuse, which of the following sources would you be most likely to use for parenting advice? (Please rank just the **top three** sources you would use by placing a '1', '2' and '3' next to the **top three** you would use. Use a '1' for your first source, a '2' for the second one and a '3' for the third source you would use for advise.)

	RANK TOP 3 SOURCES
Clergy	
Grandparents or other relatives	
Healthcare professionals	
Internet	
Magazines or newspapers	
Neighbors and friends	
School counselors, teachers	
Television or radio	

These last few questions are *optional, but encouraged*.

13. Please indicate your gender: ☐ Male ☐ Female
14. Please indicate your relationship to the child:
☐ Parent ☐ Grandparent ☐ Other (please specify): _____
15. Please indicate your highest level of education:
☐ Some High School ☐ Some College ☐ Beyond College
☐ High School Grad ☐ College Grad
16. Please give your age: _____
17. Please indicate your race/ethnicity:
☐ White/Caucasian ☐ Hispanic ☐ American Indian
☐ African American ☐ Asian ☐ Other: _____
18. What other areas of concern do you have regarding your school age child or children?

Thank You Very Much For Participating In Our Survey.